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## BIB DATA SHEET

CONFIRMATION NO. 5708

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/576,636	03/12/2007 RULE	601	3771	BRKP.021US
<b>APPLICANTS</b> Christer Sinderby, Toronto, ON, CANADA; Jennifer Beck, Toronto, ON, CANADA; Christer Strom, Pitea, SWEDEN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/CA04/01851 10/21/2004 which claims benefit of 60/514,449 10/23/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/17/2007				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /CLINTON T OSTRUP/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> ON	<b>SHEETS DRAWINGS</b> 6	<b>TOTAL CLAIMS</b> 49
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> FULBRIGHT & JAWORSKI L.L.P. 600 CONGRESS AVE. SUITE 2400 AUSTIN, TX 78701 UNITED STATES				
<b>TITLE</b> Combined Positive and Negative Pressure Assist Ventilation				
<b>FILING FEE RECEIVED</b> 2880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	